

PRV – Provider-Requested MediPASS Disenrollment

Purpose:

The purpose of this procedure is to process MediPASS Provider agreement modifications.

Identification of Roles:

Primary Role - Provider Enrollment staff will perform this procedure.

Performance Standards:

Increase MediPASS provider participation by five percent (5%) per year for each contract year, from base year. The base year is the 12-month period prior to the effective date of Iowa Medicaid Enterprise contract.

Path of Business Procedure:

Step 1: Received the change request from Providers.

- a. From the mailroom or via fax in OnBase in PRV02 “MediPASS Agreement”
- b. If via email they must be printed to OnBase.

Step 2: Outreach reviews the change for completeness.

- a. If request is not complete, the request is pended and a letter is sent to the provider requesting additional information. If the request is complete, continue processing. If the change is due to a Tax Identification Number (ID) change, send a letter notifying the provider that they must apply for a new Iowa Medicaid provider number. Areas that can be updated by Outreach staff include:
 1. Maximum number of members enrolled
 2. Age minimum or maximum
 3. Sex- female only, male only, or both female and male
 4. Current members only or new members accepted – C or B
 5. MediPASS 24 hour phone number
 6. Contiguous counties accepted

Step 3: Update Change into the Medicaid Management Information System (MMIS)

- a. Access the Provider Subsystem and enter code.
- b. Access Provider subsystem in the Medicaid Management Information System (MMIS)
- c. Enter an Action Code of “C”

Step 4: Enter 7 digit Medicaid legacy number.

- a. Tab down to the Medicaid Number and enter the seven-digit Medicaid legacy number.
- b. Press Enter.

Step 5: Press the “F3” Key

Step 6: Make changes on appropriate field

- a. Tab to the appropriate field, which needs to be updated and make the change.

Step 7: Press Enter to validate the change

Step 8: Press Enter again to complete the transaction

Step 9: Review changes for accuracy

Forms/Reports:

N/A

RFP References:

6.4.6.3.3.a

Interfaces:

N/A

Attachments:

Process Map

